

DIRECTIONS FOR MONTHLY CASH FLOW Plan

Cash flows in and out each month. *Make sure you tell it where to go!*

Yes, this budget form has a lot of lines and blanks. But that's okay. We do that so we can list practically every expense imaginable on this form to prevent you from forgetting something. Don't expect to put something on every line. Just use the ones that are relevant to your specific situation.

1 LIST YOUR MONTHLY TAKE HOME PAY.

This is the amount you have for the month to budget. **So far so good, huh?**

Monthly Take Home Pay

2 START AT THE TOP AND WORK DOWN.

Within each main category, such as Food, there are subcategories, like Groceries. Start at the top and work your way down, filling out the **Planned** column first. Add up each subcategory and put that number in the **Total** box. Also, pay attention to Dave's recommended percentages. This will help you keep from budgeting too much for a category.

FOOD	Planned	Spent
Groceries	\$600	
Restaurants	\$175	
Total (*5-15%)	\$775	

3 DO THE MATH FOR A ZERO BALANCE.

Finally, enter your take-home pay in the top box at the end of the page, then add up all Planned categories and place that total in the Category Totals box. Then subtract your Category Totals amount from your Take-Home Pay. You should have a zero balance. **Doesn't that feel great?**

<input type="text" value="\$5,000"/>	TAKE-HOME PAY
— <input type="text" value="\$5,000"/>	CATEGORY TOTALS
= <input type="text" value="\$0"/>	ZERO BALANCE

4 LIST WHAT YOU ACTUALLY SPENT.

When the month ends, put what you actually spent in the Spent column. That will help you make any necessary adjustments to the next month's budget.

FOOD	Planned	Spent
Groceries	\$600	\$647
Restaurants	\$175	\$122
Total (*5-15%)	\$775	\$769

MONTHLY CASH FLOW PLAN

Cash flows in and out each month. *Make sure you tell it where to go!*

Add up Planned column and enter here

Monthly Take-Home Pay

♥ GIVING

	Planned	Spent
Church	<input type="text"/>	<input type="text"/>
Charity	<input type="text"/>	<input type="text"/>
Total (*10-15%)	<input type="text"/>	<input type="text"/>

🍴 FOOD

	Planned	Spent
Groceries	<input type="text"/>	<input type="text"/>
Restaurants	<input type="text"/>	<input type="text"/>
Total (*5-15%)	<input type="text"/>	<input type="text"/>

💰 SAVINGS

	Planned	Spent
Emergency Fund	<input type="text"/>	<input type="text"/>
Total (*10-15%)	<input type="text"/>	<input type="text"/>

🚗 TRANSPORTATION

	Planned	Spent
Gas	<input type="text"/>	<input type="text"/>
Maintenance	<input type="text"/>	<input type="text"/>
Total (*10-15%)	<input type="text"/>	<input type="text"/>

🏠 HOUSING

	Planned	Spent
Mortgage/Rent	<input type="text"/>	<input type="text"/>
Water	<input type="text"/>	<input type="text"/>
Natural Gas	<input type="text"/>	<input type="text"/>
Electricity	<input type="text"/>	<input type="text"/>
Cable/Internet	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
Total (*25-35%)	<input type="text"/>	<input type="text"/>

👕 PERSONAL

	Planned	Spent
Clothing	<input type="text"/>	<input type="text"/>
Phone	<input type="text"/>	<input type="text"/>
Fun Money	<input type="text"/>	<input type="text"/>
Hair/Cosmetics	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
Total (*5-10%)	<input type="text"/>	<input type="text"/>

*Dave's Recommended Percentages

LIFESTYLE

	Planned	Spent
Child Care	<input type="text"/>	<input type="text"/>
Pet Care	<input type="text"/>	<input type="text"/>
Entertainment	<input type="text"/>	<input type="text"/>
Vacation	<input type="text"/>	<input type="text"/>
Education/Tuition	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
<hr/>		
Total (*5-10%)	<input type="text"/>	<input type="text"/>

HEALTH

	Planned	Spent
Gym	<input type="text"/>	<input type="text"/>
Medicine/Vitamins	<input type="text"/>	<input type="text"/>
Doctor Visits	<input type="text"/>	<input type="text"/>
<hr/>		
Total (*5-10%)	<input type="text"/>	<input type="text"/>

INSURANCE

	Planned	Spent
Health Insurance	<input type="text"/>	<input type="text"/>
Life Insurance	<input type="text"/>	<input type="text"/>
Auto Insurance	<input type="text"/>	<input type="text"/>
Homeowner/Renter	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
<hr/>		
Total (*10-25%)	<input type="text"/>	<input type="text"/>

DEBT

	Planned	Spent
Car Payment	<input type="text"/>	<input type="text"/>
Credit Card 1	<input type="text"/>	<input type="text"/>
Credit Card 2	<input type="text"/>	<input type="text"/>
Credit Card 3	<input type="text"/>	<input type="text"/>
Student Loan	<input type="text"/>	<input type="text"/>
Medical Bill	<input type="text"/>	<input type="text"/>
Personal Loan	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
Other _____	<input type="text"/>	<input type="text"/>
<hr/>		
Total (*5-10%)	<input type="text"/>	<input type="text"/>

Your goal is 0%

Once you have completed filling out each category, subtract all category totals from your take-home pay.

